

Nebraska Ram Project

Nebraska Department of Agriculture / Bureau of Animal Industry

Veterinarian Name (Print):	Flock Owner Name (Print):	Flock ID #:
Veterinarian Address:	Flock Owner Address:	
Phone #:	Phone #:	
Fax #:	Fax #:	
Date Blood Collected:	Flock Type – Commercial <input type="checkbox"/> Pure Bred <input type="checkbox"/>	
Vet Signature: Vet Code:	Flock Size (Breeding Sheep) _____	

Please Send Results to: (circle one or more)

Vet Fax (listed above)

Owner Fax (listed above)

Vet Address (listed above)

E-Mail _____

Owner Address (listed above)

	Official Scrapie ID	Other ID	Breed	Age	Sex	Additional tests requested (To be paid by flock owner)
1						
2						
3						
4						
5						

Please Mail Samples to:

Gene Check, Inc.
1175 – 58th Ave., Suite 100
Greeley, CO 80634
800-822-6740

Original – Lab

Copy– BAI Office*

***Fee Basis payments cannot be made until copy of this form is received by BAI office.
For use in Nebraska Ram Project only, not for use for routine flock testing.
Collect 2 ml in a lavender top tube.**

Nebraska Department of Agriculture
Bureau of Animal Industry
P.O. Box 94787
Lincoln, NE 68509